

## **Executive Summary on Alaska Trauma System**

By the Alaska Trauma Program, DPH, DHSS

June 22, 2011

Trauma must be recognized as a disease process. Trauma has seasonal variations and trends, and characteristic demographic distribution. It is also age dependent. Like heart disease and cancer, trauma has identifiable causes, established means of treatment, and defined means of prevention. But unlike heart disease, trauma is communicable. People injure other people. Attitudes toward risk-taking behavior-such as running red lights or driving while under the influence can spread throughout a community. Injury is not an accident; it is a predictable and preventable disease.

Designated trauma centers (Level through Level IV) are only one component of a trauma care system. Appropriate care must be provided along a continuum that includes prevention, pre-hospital care, care at all acute care facilities and trauma centers, and rehabilitation.

Appropriate care for the major trauma patient will continue to be expensive. The charge for the average trauma admission is two to four times greater than for the average general admission. However, trauma centers remain cost effective because they significantly improve survival and reduce disability. The amount paid in Federal, state, and a local tax by a rehabilitated trauma patient returning to work far exceeds the cost of trauma care.

Funding for trauma is needed on several levels. National planning and development, leadership and research must be funded at a Federal level. These critical components have received partial and intermittent Federal financial support in the past. In fact, the goal today is to complete the job begun in the 1970's by the Emergency Medical Services Systems Act of 1973. This act grew out of the landmark study published in 1966 by the National Academy of Sciences and National Research Council, "Accidental Death and Disability: The Neglected Disease of Modern Society," which called attention to the deficiencies existing in American trauma care and stressed the need for comprehensive and organized care delivery.

In the early 1990s, the Trauma Care Systems Planning and Development Act of 1990 provided new opportunities for trauma system development and many states made significant progress until Congress failed to fund the program in 1995. New funds and enabling legislation are critical to the completion of this phase of trauma system development.

In 2010, the Alaska legislature enacted House Bill 168, the Trauma Care Fund (AS 18.08.085). This fund was established to assist designated trauma centers in offsetting the costs of providing optimal care to seriously injured Alaskans. The Fund is also an incentive for hospitals to participate in the trauma system as designated trauma centers. This funding has brought a great participation from Alaska's 24 acute care facilities to participate in the trauma system at levels commensurate with their capacity. Financing of the trauma care system in Alaska is intricate. Alaska has achieved an important step via legislation establishing a permanent trauma

care fund. The Fund is composed of two dollar sources. One source is appropriated state general funds. The Second funding source is matching DSH funds. The sum is five million dollars.

The Alaska Trauma Registry (ATR) was one of the Nation's first statewide injury surveillance systems. It was adopted by DHSS and expanded into a statewide program in 1991. The Alaska Trauma Registry includes data from all 24 of Alaska's acute care facilities. The Alaska Trauma Registry is a vital link to evaluate the quality of trauma patient care in Alaska and to use evidence-based data to develop a comprehensive trauma system. This data is used for informed injury prevention programs, trauma system planning, relevant legislation, research, and policy development by multiple key stakeholders. The Alaska Trauma Registry reported more than 5,000 trauma cases reported in Alaska in 2009. This data is submitted to the National Trauma Data Bank. The number of reported trauma cases has increased steadily each year since the initiation of the Trauma Registry in 1991. The increases in the number of trauma cases have historically affected every age, race, ethnicity, and gender. All people of the State are potentially affected by traumatic injury, and this valid data is paramount in improving trauma care. The Alaska Trauma Registry has made great strides in the past year. The trauma data is currently being submitted by all acute care facilities in Alaska with current data submission through 2010. Since the beginning of the Alaska Trauma Registry, this is the first time that all hospitals are up to date with data collection and fiscally responsible for their trauma registry. The State has limited Federal funding in the future to support the Trauma Registry.

The Alaska Trauma System, coordinated by the Department of Health and Social Services, supports the designation of trauma services and verification of trauma care providers, the collection of trauma data through the trauma registry, the coordination of trauma-related funding appropriated by the legislature, and other vital functions. The Alaska Trauma System Plan utilizes the "Model Trauma Care System Plan," a U.S. Department of Health and Human Services publication as the template to develop and implement a trauma care delivery system in Alaska. Professional trauma education programs throughout municipal and rural Alaska are also carried out by the lead agency. These educational programs also include pediatric and other specialty care courses.

The investment toward a Trauma System, a Trauma Registry, and a Trauma Care Fund guarantees a robust emergency and trauma care system. Strengthening trauma care results in clinically improved, well-coordinated and available health care services that meet the needs and expectations of all Alaskans. The investment in trauma care will result in better care for all patients, prepare the state for a natural or human-made disaster, and improve the overall healthcare delivery system for the people of our state